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Specimen Sheet.

THE

AMERICAN MEDICAL LIBRARY

AND

INTELLIGENCER.

A Concentrated Record of Medical Science and Literature.

EDITED BY

GRANVILLE SHARP PATTISON, M. D. AND ROBLEY DUNGLISON, M. D.

OF THE JEFFERSON MEDICAL COLLEGE, PHILADELPHIA.

Subscription Price, Ten Dollars a Year.



PUBLISHED SEMI-MONTHLY,
BY ADAM WALDIE, NO. 46, CARPENTER STREET.
PHILADELPHIA.

Sir--

I send for your examination a specimen sheet of a new medical library, which, from the plan already matured, and the means prepared for its fulfilment, is offered with confidence to your attention as a work destined to exercise a powerful and beneficial influence among the profession throughout the country. The high price of medical books, added to the delay and difficulty of transporting them to the interior, has hitherto operated powerfully against the country physician. But by the plan here adopted, the barrier will be removed; he will enjoy nearly all the medico-literary advantages of his professional brother in the city, as he will receive periodically, and at short intervals, authentic accounts of the latest discoveries in medical practice, reports of interesting and important cases, practical information of the success or failure of new theories, combined with the publication of entire standard works, thus forming a medical library of the most valuable description, at an expense almost imperceptible.

The names of the editors are too well known to require any thing more than their simple announcement to guarantee the complete and satisfactory fulfilment of the editorial department. For the punctuality of the publication, the various works published by me for the last four years, during which not a number has failed, must be the evidence in my behalf. And of late, my facilities have been so increased, as to render punctuality still more certain.

I beg to bespeak your patronage to the work, and ask you to recommend it to the support of the profession in your neighbourhood, as an economical vehicle for disseminating valuable and scientific medical knowledge.

An early transmission of the name is requested. Payment may be made on the issuing of the first number of the work.

I am, very respectfully, your obedient servant,

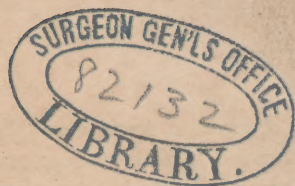
ADAM WALDIE.

Philadelphia, November, 1836.

NOTICE.

Since my letter, addressed to the subscribers to "THE REGISTER AND LIBRARY OF MEDICAL AND CHIRURGICAL SCIENCE," has been printed, I have received the 37th, 38th, 39th, and 40th numbers of that journal. Although Mr. William Green has published a most unjustifiable attack on my character as the late editor of the work, in a note printed on the cover, I consider it unnecessary to offer any refutation. I shall only repeat what I have stated in the letter referred to, "that nothing will tempt me to enter into a controversy, or under any circumstance again to advert to my connection with 'THE REGISTER AND LIBRARY OF MEDICAL AND CHIRURGICAL SCIENCE.'" The best answer I can furnish to the charge of the want of "INDUSTRY" on the part of the editor having been the cause of irregularity in the publication of my late journal, will be the perfect regularity with which the new one, "The American Medical Library and Intelligencer," will appear, with Mr. Waldie as the publisher.

GRANVILLE S. PATTISON.



THE
AMERICAN MEDICAL LIBRARY
AND
INTELLIGENCER.

A CONCENTRATED RECORD OF MEDICAL SCIENCE AND LITERATURE.

The establishment of "LIBRARIES," for the general diffusion, at a cheap rate, of information, has, within these few years, exercised the happiest influence in disseminating literary, religious, medical, and legal information through these United States. To Mr. Waldie, the publisher of the present work, the merit of conceiving the plan, and carrying it into extensive operation, is due. The editors feel, from the manner in which he has conducted his Select Circulating Library, and other periodicals, that they offer to the profession a sufficient guarantee for the regular publication of "THE AMERICAN MEDICAL LIBRARY AND INTELLIGENCER."

The value of a work of the present character is too obvious to require any argument to prove it. The presses of Great Britain, France, Germany, and Italy, are monthly issuing invaluable works on the different topics connected with medical and chirurgical science; and although it is of the highest importance to the interests of our profession in the United States, that the most valuable of them should be republished, and widely circulated, the expense which would attend their publication in the usual form prevents more than a very few of them from ever being placed in the hands of American physicians. The establishment of a periodical "medical library" supplies the *desideratum*. Every work of interest can, immediately on its publication, be reprinted, and placed in a few weeks in the libraries of the physicians who inhabit our continent, from its Atlantic border to its western boundary at the base of the Rocky Mountains; and every practitioner in the country can secure to himself this invaluable source of improvement for the small subscription of ten dollars *per annum*. We think much too highly of the members of our profession, to permit ourselves to doubt, that they will hesitate to avail themselves of the valuable privileges which this publication furnishes, and we feel the strongest confidence in its receiving from them that patronage, which will reward its spirited publisher, and secure its complete and continued success.

As "THE AMERICAN MEDICAL LIBRARY AND INTELLIGENCER" is intended to form "A CONCENTRATED RECORD OF MEDICAL SCIENCE AND LITERATURE,"—besides reprinting the valuable works on medicine and surgery, which appear in Great Britain, and furnishing translations from the medical press of the continent of Europe, one part of it, "THE INTELLIGENCER," will contain a periscopic notice of the interesting Cases, Facts, and Discoveries, which appear in the medical journals of Europe, and likewise analytical reviews of the American medical periodicals. "THE AMERICAN MEDICAL LIBRARY AND INTELLIGENCER" will therefore not only enrich the libraries of its subscribers with copies of the most valuable medical and surgical works published in Europe, but it will furnish them, in a concentrated form, with all the facts and discoveries of interest, which the innumerable medical periodicals of this country, and of Europe, contain; and, from the arrangements which Mr. Waldie has made to receive the European journals and works immediately on their publication, they will be put in possession of these a few weeks after their appearance.

To enable the readers of the present prospectus to comprehend the plan of "THE AMERICAN MEDICAL LIBRARY AND INTELLIGENCER," the editors conceive it only necessary to state, that it will be published in semi-monthly parts, on the 1st and 15th of every month, *and the publisher pledges himself that nothing shall prevent its appearance regularly on the days of publication.* Each part will contain 128 pages, and will be divided into two parts, the "Library" and the "Intelligencer." The latter will occupy, in each number, from 16 to 20 pages, printed on a paper, and in the type and form, of the specimen which accompanies the prospectus. This part of the work will contain "A CONCENTRATED RECORD OF MEDICAL SCIENCE AND LITERATURE," to be made up of information of the following kinds:—1st. Editorials. 2d. Short original communications of interest, furnished from the practice of the editors or their friends. 3d. Critical and analytical notices of all original American medical publications. 4th. Analytical notices of the different American medical journals. 5th. A periscopic review and detail of the interesting facts contained in the European medical periodicals. And, lastly, a summary of medical news.

The former, THE LIBRARY DEPARTMENT, will occupy 112 pages, and will be printed in the type and form of the specimen. It will contain reprints of the most valuable medical and surgical works which appear in Great Britain, and will occasionally be enriched with translations of medical books, of great interest, from the French, German, or Italian presses. In selecting books for republication, the editors will always give a preference to those which are of a *practical* character, and such as, in their judgment, will be most interesting to their subscribers.

Having thus shortly detailed the plan on which "THE AMERICAN MEDICAL LIBRARY AND INTELLIGENCER" is to be conducted, the editors

will only, in conclusion, state, that no effort shall be wanting on their part to give interest and value to the publication. Their duties, they are aware, will be very onerous; but the conviction,—that the extensive circulation of the work must exercise a mighty influence in elevating, still higher, the scientific and practical reputation of AMERICAN PHYSICIANS AND SURGEONS,—will cheer and encourage them in their labours, and induce them, to the utmost of their ability, to render the work what it purports to be, “A CONCENTRATED RECORD OF MEDICAL SCIENCE AND LITERATURE.”

TERMS.

1. The Library will be published semi-monthly, in numbers of 128 octavo pages each; 112 of which will consist of a reprint of a standard work,—the remainder, of original matter. The whole so arranged that each work may be bound separately.

2. The subscription price will be TEN DOLLARS per annum, payable in advance. Any person remitting payment for ten copies, will be entitled to a copy gratis.

3. Subscriptions received in January or July of each year.

LETTER

To the subscribers to “THE REGISTER AND LIBRARY OF MEDICAL AND CHIRURGICAL SCIENCE,” printed and published by Duff Green, Washington, D. C.

BY ITS LATE EDITOR.

Gentlemen—In retiring from the editorship of “THE REGISTER AND LIBRARY OF MEDICAL AND CHIRURGICAL SCIENCE,” I feel it due to you to explain the motives which have induced me to do so, and to place before you the correspondence which has taken place—on the subject of my retirement—with the PUBLISHER. I have no desire to find fault with the conduct of that gentleman, either as regards the irregularity of his publication of the work, or the manner in which he has removed my name as its editor, before the completion of the second volume. That I intended to retire, my letter of the first of October certainly intimated; but surely the spirit and tenor of that letter were not such as to justify any feeling, or to entitle him to issue the 36th number without my name, and to announce to the subscribers a radical change in the future character of the work. As the PUBLISHER states,—in his notice “To the Reader,” in the number referred to,—that “*the remaining numbers are already stereotyped, and in a rapid course of publication,*” these numbers having been prepared for publication under my editorship, it would certainly have only been treating me with common courtesy to have continued my name on the cover as editor, until the last of the series was

published; advertising, in the mean time, the subscribers of my intended resignation on the termination of the second year. Personally, the removal of my name before the completion of the second volume, is a matter of perfect indifference; but feeling myself under a pledge to the subscribers to continue my editorship until the end of the current year, its removal before that time, without explanation, might lead them to form erroneous and unjust surmises on the subject. The present opportunity being therefore open to me, I avail myself of it to explain to them the facts.

The very irregular publication of the "Register and Library of Medical and Chirurgical Science" has been to me a subject of deep regret, and to the subscribers one of uniform and, in some instances, of angry complaint. The editor was the person who was looked to; and although he had not the slightest control over the publication, I fear that in many instances he was the party blamed. Receiving, by almost every post, letters of complaint from the subscribers, on account of the irregularity of the publication, and having no power to remedy it, I had determined long ago to retire from the editorship on the completion of the present volume. The plan of the publication, however, being a favourite one, I felt disposed to engage in a similar work, if issued under my own immediate inspection. But although I felt confident that such a work published in Philadelphia could not fail to prove eminently successful, still I did not allow my own interest alone to guide me, but immediately addressed to the publisher of "THE REGISTER AND LIBRARY," &c. the following letter, in which I offered either to purchase his interest in the work, or to dispose to him of my own. The terms of my letter, it will be observed, are most liberal. In the event of his purchasing my interest, I bind and oblige myself not to undertake the editorship of any other periodical; whilst, in the event of his selling his interest, he is not required to give any pledge as to his not publishing a work of a similar character. My LETTER, and the PUBLISHER'S answer, will, however, speak for themselves.

To General Duff Green, Washington City, D. C.

PHILADELPHIA, Oct. 1st, 1836.

My Dear Sir:—I have intended for some time past to write you in reference to the "Register and Library," &c. which has been published so irregularly as to have not only an injurious effect on the reputation of the work, but likewise to operate against my professional character. An application, which has been made to me by one of the most extensive publishers in this city, to undertake the editorship of a similar work, to be published in Philadelphia, induces me without delay to communicate with you on the subject, and to state to you that, as I consider it impossible to have the work done justice to, the editor residing in Philadelphia and the publisher in Washington City, I have determined to retire from being the editor of a work published at a distance. Under these circumstances, I should therefore wish to know from you what value to attach to the property of the "Register and Library," &c. and what sum you would be disposed to allow me for my interest in the work, and for what sum you would sell your own:—in other words, as we hold the same interest in the property, what you would be disposed to give or take for the property. The payments to be made by notes at 6, 12, and 18 months. Should I dispose to you of my interest in the property, I shall of course consider myself bound not to undertake the editorship of any other periodical; should I on the contrary not do so, but purchase yours, I shall, in connection with one of my colleagues, enter on the duties of editor of a similar work to be published in Philadelphia. You will oblige me if you will write me, if possible, by return of post, in answer to this communication.

I remain, my dear sir, your obedient servant,
 GRANVILLE S. PATTISON.

To Dr. Granville S. Pattison, Philadelphia.

WASHINGTON, 9th October, 1836.

Sir:—I have received and noted the contents of your letter of the 1st. I regret to learn that the irregularity of the publication of the Register, &c. should [have] done you a professional injury; and more regret that your time has been so much occupied in more profitable pursuits, as to prevent you giving that attention to your department of the work, which was promised to the public, and the failure of which has no doubt done you as well as myself more injury than the delay in the publication of the work, which has *always* been waiting on you. I state this not by way of recrimination, but because I can see in your letter—that having resolved to establish a rival work, you assume the position stated more in reference to the future than the past.

It is proper that I should at once put you right on another point—we do not hold equal property in the work. It has been got up at my risk, and at an expense of more than twelve thousand dollars to me; which expense and risk were mine, and which, together with the entire cost of publication, are to be first paid to me before your interest commences; and then you are to have one half of the profits for and in consideration of your services as editor. Now when your services as editor cease, your compensation and interest in the publication cease with it. I regret that I am about to leave home under circumstances which forbid delay, my daughter's health requiring me to attend her south. I will direct the account to be stated, and if you will do me the favour to say what amount you have received on account of subscriptions, I will on my return, on the first of December, be prepared for a settlement, and willing to leave the whole matter between us to the decision of disinterested persons.

Respectfully, your obedient servant,
D. GREEN.

You will, I think, gentlemen, admit, that the answer to my letter was not such a one as I was entitled to expect. I wrote to the publisher in the most friendly spirit; I stated a fact, the irregularity of the publication of the journal, which neither he nor any other person could gainsay; I did not even insinuate any blame to him for the want of punctuality in the appearance of the work; on the contrary, I attributed the irregularity of publication to the editor's residing at a distance from the city where the journal was published. "As it is impossible," I said, "to have the work done justice to, the editor residing in Philadelphia and the publisher in Washington City, I had determined to retire." Having delicately guarded even against hinting at any blame on his part, he was certainly not justified in attempting to charge me with being the cause of the irregularity complained of by the subscribers, and to state that "the work has *always* been waiting on you." It is very strange, that the publisher should make such a statement in his letter addressed to me on the 9th October, and should, on the 17th of the same month, eight days afterwards, announce to the subscribers that "*the remaining numbers of the present volume are already stereotyped.*" If the remaining numbers of the volume, SEVENTEEN in number, are *already stereotyped*, surely neglect on the part of the editor cannot be the cause of no number having appeared for the last seven months.

In reference to the observations made in the letter of the publisher, in regard to the pecuniary concerns of the publication,—as these have no interest for the subscribers, I shall not discuss them. I shall only remark, that although by our agreement I was to receive one half of the profits of the publication, so indifferent have I felt in reference to my pecuniary interests, that I have never yet asked the publisher to make a settlement with me, nor have I received from him one dollar since the journal was established. The only money I have ever received for my services, was the few subscriptions paid into my own hands.

For the character of the publisher I entertain respect, and the object of this letter is not to derogate from it. It is simply to vindicate my own reputation; and, having now done so, nothing will tempt me to enter into a controversy, or under any circumstance again to advert to the subject of my connection with the "THE REGISTER AND LIBRARY OF MEDICAL AND CHIRURGICAL SCIENCE." Having thus shortly placed the facts before the subscribers, I shall hereafter remain contented with the present *exposé*.

In conclusion, gentlemen, I conceive I am entitled to ask from you that patronage for "THE AMERICAN MEDICAL LIBRARY AND INTELLIGENCER," which you have so liberally bestowed on my former work. The plan of "THE REGISTER AND LIBRARY OF MEDICAL AND CHIRURGICAL SCIENCE" was all my own; and I believe I do not arrogate too much to myself, and attribute more than is due to the kind feelings of my friends, when I state that a large number of the subscribers to the work were induced to patronize it on my account. To all such I would appeal, and would respectfully solicit them, *with as little delay as possible*, to forward their names as subscribers to Mr. Waldie, the publisher, so as to enable him to regulate the number of copies to be published on the first of January next.

From the prospectus, which accompanies this letter, it will be observed, that I have associated with myself, in the editorship, my distinguished friend and colleague, DR. ROBLEY DUNGLISON, a gentleman whose scientific and literary reputation will afford the strongest guarantee for the editorial department being ably conducted. For the mechanical part, the reputation of Mr. Waldie as a publisher and printer will assuredly satisfy the public.

I am, respectfully, gentlemen, yours,

GRANVILLE S. PATTISON.

NOTE.—The first European work which the editors propose to reprint, is the excellent treatise on Blood-letting, by DR. JAMES WARDROP, of LONDON. A gentleman who, as the author of works on the Eye, Fungus Hæmatodes, Aneurism, &c. &c., has been long and most favourably known to the profession. As a specimen of the page, type, paper, &c. &c., a part of one of the discourses is printed.

ON BLOOD-LETTING.

DISCOURSE I.

GENERAL OBSERVATIONS ON THE BLOOD.

Of the Blood ;—its Functions ;—its “ Living Principles ;” —its Morbid Changes ;—its quantity in Man ;—its Sensible Qualities—smell—taste—temperature.—The Coagulation of the Blood ;—its Phenomena ;—Utility of Coagulation in stopping Hemorrhage,—in uniting divided parts,—in the process of Reparation,—and in the Cure of Aneurisms.—Deficiency of the Coagulatory Power in the Blood, sometimes Hereditary,—fatal Cases,—Treatment.—Consistence of the blood ;—Component parts of the Blood,—serum,—red Globules,—coagulated lymph.—The Buffy Coat.

The abstraction of blood from the human body is one of the most powerful of our therapeutic means, and the observations which I am about to make on this subject are to be considered chiefly as the result of my own experience in a great number of diseases amongst the different classes of society. Diseases assume an almost infinite diversity of form in the various ranks of the community, and this ought always to caution us against attempting to draw any general conclusions from examples of diseases only amongst a particular class of persons. Those who may have been in the habit of seeing diseases chiefly amongst the peasantry, or in the army, or in the navy, will be much struck with the various shades which the same complaints present in this metropolis, where patients are met with whose constitutions have suffered from indulgence in all the vices, and from all the mental excitement to which man is exposed amid this vast concourse of human beings.

A more fit opportunity cannot, perhaps, occur to dwell on the importance of carefully watching the effects of the same remedy in different examples of the same disease, and to point out how diseases are modified by the various circumstances and relations of each individual case.

Two examples of a disease scarcely ever occur which are precisely the same in all respects, and though they may resemble each other in many essential points, still they will be found to differ, either according to the period which the disease has existed—the age—the sex—the temperament of the patient,—or according to some other circumstance which demands consideration in the treatment, and which ought more or less to modify that

treatment. This observation applies in a particular manner to those diseases for which medicine possesses what is called a "specific" remedy. In treating these diseases, much depends on the state of general health in the individual before such specific medicines are administered. From want of such care, how often do we hear of the different preparations of mercury, bark, and iron, disagreeing with particular patients? In almost every instance this will be found to arise from some part of the alimentary canal being in a deranged state, which state ought to have been corrected previous to administering the specific remedy. The most useful medicines often fall into disrepute from want of such attention, whilst under other circumstances the dose must be changed, as well as the form of administering it. I do not mean to affirm that there are no individuals with whom particular medicines disagree. On the contrary, there are persons in whom cinchona, mercury, iron, and even milder drugs, as rhubarb, senna, and many saline medicines, have a decidedly pernicious effect. Such instances, however, are only to be considered as exceptions.

Diseases, I have already remarked, assume an infinite variety of character, not only in persons of different ages and constitutions, but also in people living in different districts of a country, and in different ranks of society. The limited observations, therefore, which are made on the treatment of patients in the wards of an hospital, have often had the imputation of being incorrect from the same remedies having been used with very different effects in other classes of the community. I have often heard medical men, whose practice has been confined to one class of persons, such as soldiers or sailors, and who have acquired great expertness and skill in treating that particular class—I have often heard such practitioners remark, how different were the systems which they found it necessary to pursue when they were called on to treat the diseases of other classes of individuals, particularly those of women and children, and such of the poor as are habituated to intemperance, and irregular habits of life.

I cannot dwell too strongly on the importance of this subject, as I think it may be distinctly traced that many errors in the treatment of diseases have arisen from one set of practitioners being accustomed to act with greater energy than is necessary, and following indiscriminately a particular system, and another who, from seldom seeing the more violent forms of disease, practise with timidity and indecision.

These observations, while they may be applied to the use of any remedy, are yet particularly applicable to that now under consideration, as there is no means more generally used, and more decided in its effects, than the abstraction of blood, and yet there is no point on which you will find greater diversity of opinion, and fewer distinct rules laid down, both as regards the circumstances and extent to which it should be employed. The practical errors to which I have now alluded, can only be corrected by a nice discrimination in individual cases; and the power of thus

discriminating can only be acquired by being in the constant habit of observing diseases amongst all classes of the community, and watching every description of disorder, more especially at an early period of the practitioner's life,—when the perceptive powers are most acute, and the mind has not yet been fettered by theoretical and hypothetical doctrines. A habit of examining diseases in the living body, and also a familiar acquaintance with the appearances of diseased structure, lead to a quick discrimination of the peculiarities of each individual case, and to a comprehensive knowledge of medicine.

Previous to entering on the consideration of the curative effects of abstracting blood, I propose to make some general observations on the natural qualities and the more remarkable changes of the sanguineous fluid.

The blood which is contained in the heart, in the arteries, and in the veins, is kept in a continual motion, called its *circulation*. During this movement, it undergoes certain regular and constant changes in a healthy animal. It receives new liquids, which are prepared by the process of digestion, and by cutaneous absorption; and it goes through changes in the lungs, where it is submitted to the action of the atmospheric air.

It travels throughout the whole body, furnishing to each organ certain materials, and it is deprived of other parts by the various secretions and excretions. That the blood should have been considered as the *life* of the body need not be wondered at; for if its passage to any part be destroyed, that part dies; and if beyond a certain quantity be extracted from the system, the death of the animal then follows. But the blood is not only necessary for the life, but for the growth, of every part of the body; and when any organ suffers an injury, it is the blood which is immediately employed for its reparation.

It is not, therefore, surprising that the blood should have been supposed to possess, in itself, a “living principle,” an opinion advocated by the ingenious Hunter. The principle of life we must suppose to begin in some one of the component parts of a living animal; and as we observe a chain of phenomena commencing from the entrance of the food into the stomach,—the conversion of that food into chyle,—the mixture of the chyle with the blood,—and the life and growth of the various parts of the animal from that blood,—is it not as probable that the “living principle” is first developed in the blood as in any of the other constituent parts of the animal?

In order fully to comprehend the various functions of the blood—the morbid changes which it undergoes—its influence in repairing injuries—and the effects of removing it from the body for the cure of disease, it will be proper first to consider its component parts, and the alterations in their qualities and proportions, all which form important indications in the diagnosis of diseases.

It was remarked by Dr. Heberden, that neither the blood nor the urine can afford criteria for the treatment of diseases. I need make no comment on such an unphilosophical opinion; and in proof of its erroneous tendency, refer to the works of Dr. Prout, wherein you will perceive how important a comprehensive knowledge of the chemical qualities of the urine is, in the diagnosis of the diseases, not only of the urinary organs, but of the whole system; and I have no doubt that if an equally philosophical mind were employed in the analysis of the *blood*, much important information regarding the morbid changes of that fluid, and the modes of remedying them, might be discovered. It has indeed been, of late, too much the custom to ridicule the humoral pathology; but this has not arisen from the attentive investigation of disease.

It is indeed extremely probable that the qualities of the blood are considerably altered in many diseases, though such changes cannot always be detected. We observe, for example, that there is a complete alteration of the serum in jaundice, and were it not for the change of its colour, we should perhaps have no evidence that the blood was at all altered in that disease. Odorous substances are also mixed with the blood, as balsams and asparagus are found in the urine.

With regard to the quantity of blood in man, Haller supposed that about fifty pounds of fluid circulated in a person weighing one hundred and sixty pounds, of which he considered twenty-eight pounds to be blood.

There has not, however, been yet contrived any mode of ascertaining the precise quantity of blood in different people, and it is not at all improbable that the quantity may vary much in the same individual at different times; neither is it at all certain, whether persons afflicted with diseases which are relieved by the abstraction of blood from the system, have had an undue quantity of that fluid.

It is generally considered, that, in proportion to the size of their body, young persons have a greater quantity of blood than adults, that adults have a greater quantity than the aged, and that fat people have also less blood than the lean.

That there is a great difference in the quantity of blood in different people would appear probable, from the circumstance, that if a succession of individuals be observed, afflicted with a similar disease, requiring the abstraction of blood for its cure, the quantity necessary to produce the same effect, varies very much in every different instance, which may probably depend on differences in the quantity of the blood in each person.

The quantity of the blood varies very much in dead bodies. In general, it is abundant in those who have died from drowning, and those diseases which suddenly destroy life, as apoplexy, whilst those who die from lingering ailments have a very small quantity of blood.

Fresh blood emits a peculiar animal *smell*, and a thin vapour rises from it, which is nearly as insipid as water. It is glutinous to the *touch*, slightly saline to the *taste*, and its specific gravity is rather greater than that of water.

The *temperature* of the blood has not been found to vary much in different diseases, its natural heat diminishing a few degrees in the cold fit of ague, and increasing during inflammatory fever; and it has also been observed that the arterial is warmer than the venous blood.

Coagulation is one of the most important properties of the blood. Whenever blood is removed from its proper vessels, a process of coagulation takes place, and this coagulation happens sooner or later, according to particular circumstances.

Healthy blood coagulates in about three minutes and a half; the coagulation is usually completed in seven minutes, and in twelve minutes the mass becomes firm.

Blood coagulates in the ratio of its specific gravity; the lighter the blood the more slowly does it coagulate; and coagulation takes place more or less quickly, according as the orifice from which it flows be small or large, or the stream fast or slow.

Coagulation, too, is rendered slower by cold. We observe it take place quickly when the blood is received into a basin or flat vessel, and it coagulates soonest if the vessel be metallic. The rapidity of the coagulation also depends on whether it be the first or last portions which are abstracted, either from an artery or a vein.

Blood, which is kept at rest, coagulates more slowly than when it is stirred or agitated. It coagulates most quickly when drawn through a small orifice, and allowed to trickle down the arm. Strong action of the arterial system appears also to dispose the blood to coagulate slowly, but when the vascular action is diminished, as in fainting, coagulation takes place more quickly; and hence the assistance nature derives from syncope, in plugging up the orifice of a bleeding vessel.

The power of the blood to coagulate is essential for the performance of many important functions in the animal economy, whether in a state of health or disease.

1st. It is this quality of the blood which arrests the bleeding from a wounded vessel.

2d. Coagulation is the means of limiting spontaneous hemorrhages, by plugging up the open mouths of the vessels from which the blood is poured out.

3d. It serves to agglutinate the divided edges of wounded skin.

4th. It is important in the restoration of a lost part, by forming a covering to prevent the contact of the external air with the newly-exposed surface.

5th. It forms a parenchyma or matrix for the passage of new vessels, in the restoration and regeneration of parts that have been destroyed, as in the process of granulation.

6th. It is the power of coagulation which nature employs to prevent the bursting of an aneurismal swelling.

7th. And lastly, it is equally useful in plugging up the canals of diseased veins, and in agglutinating their wounds.

As regards *spontaneous hemorrhage*, it has been already observed, that this coagulating power of the blood answers a very important

purpose. There are many diseases wherein an effort is made by nature to relieve the general system, or a particular organ, of a superabundant quantity of blood, and little or no disposition is made to arrest its progress, until considerable debility or syncope supervenes, which has the effect of promoting the necessary coagulation. And, moreover, when blood is lost by a wound, the diminution in the quantity of the blood, by retarding the force of circulation, creates a power in that blood to coagulate more speedily, and thus arrests the hemorrhage. Hence is derived the useful practical lesson of encouraging a state of syncope, in order to assist in stopping hemorrhage. Indeed, when syncope does take place, during operations, we ought to watch the state of the wound, after the syncope goes off, before venturing to close it, for the vessels often begin to bleed, when, in order to prevent secondary hemorrhage, they ought to be secured by ligatures.

The importance of this property of coagulation in the blood, is also exemplified in repairing injured or lost parts of the body. When the skin, for instance, is divided, the cut edges adhere, and this adhesion is effected by a quantity of coagulated blood being interposed between the lips of the wound. Here the coagulated blood seems to act as a mere bond of union, and, I may observe, as a general rule, that whenever we are able to keep the lips of a wound together by the adhesive property of the blood alone, blood is the most preferable, and the best plaster.

Hunter believed, that the coagulum thus formed between the edges of a wound, possessed within itself a power of generating vessels, and thus became organised; but whether under the ordinary circumstances of reparation new vessels are formed in the midst of the coagulum, or whether they shoot into the coagulum from the adjacent surfaces, and are continuations of those which have been divided, it is certain that vessels meet together and anastomose freely in the coagulum, which, along with the nerves that are also supplied, ultimately constitute a complete organisation of what originally was a mass of coagulated blood.

The power of the blood to coagulate for the purpose of the restoration of parts, is exemplified when a portion of the skin is accidentally removed. In such a case, coagulated blood is first deposited on the wounded surface, and coagulable lymph is then effused by the arteries between the coagulum and the wounded surface, for the purpose of forming a matrix for granulations; the growth of which granulations and their subsequent cicatrization repairing the lost part.

The power of coagulation in the blood is also employed by nature for the cure of *aneurism*—one mode at least of spontaneous cure entirely depending on this process. When an aneurism is formed, the blood which fills the dilated part of the vessel, or the proper aneurismal tumour, does not circulate either in the same direction, or with the same velocity as in the natural condition of the vessel. The consequence is, that a process of coagulation of the blood in the tumour commences, and the extent of this process varies

THE INTELLIGENCER.

CASE OF FATAL DISORGANISATION OF THE BRAIN,

WITHOUT CORRESPONDING DERANGEMENT OF THE INTELLECTUAL AND MORAL ACTS.

[The following interesting communication was addressed to one of the editors, by his intelligent friend, Dr. G. W. Boerstler, now of Lancaster, Ohio, previously a highly respectable practitioner at Hagerstown, Maryland. It is one of the many cases which prove how little we know of the precise functions executed by particular parts of the brain; and what an extent of observation and comparison of facts are necessary, before we can pronounce, with any thing like certainty, on the subject. The pertinent questions, propounded by Dr. Boerstler, are easier asked than answered. They may elicit interesting cases and comments, from such of our readers as have paid particular attention to the physiology and pathology of the encephalon.]

Lancaster, Ohio, September 3d, 1836.

Dear Sir,—Having leisure, I take the liberty of furnishing you with the facts of a case, which to me are of deep concern, and are not devoid of interest to the physiologist and pathologist. I transcribe from my note book, as follows:—In August, 1833, I was called to see William Miller, a lad about eleven years old; he had just received a kick from a newly shod horse, which fractured the right superior portion of the os frontis, and the anterior portion of the right parietal bone. During the operation of removing the fractured bones, I found one portion an inch and a half long, of an irregular triangular form, driven into the right anterior lobe of the cerebrum, to the depth of an inch; on removing it, about a table-spoonful of brain was discharged. The piece of bone having its edges serrated, and being driven from before backwards, necessarily produced a very great laceration of the meninges. The common integuments over the fracture were much contused and lacerated, and sloughed in the course of a few days, leaving exposed a very considerable portion of the skull and brain. I moulded to the convexity of the cranium wet pasteboards, and then saturated them with albumen, which, when dry, gave them considerable firmness; these I confined with the double-headed roller. I looked upon these precautionary measures as important, for I feared hernia cerebri; four days gave reality to those fears; hernia came on, but after six days' perseverance I succeeded in preventing any farther protrusion. There was no compression, save by the fractured pieces, which were readily removed. The boy's faculties were not destroyed, but there was some intellectual confusion, from the time of the injury, during the operation, and for two hours after; *from which time he recovered every faculty of the mind, and they continued vigorous for six weeks, and to within one hour of his death, which took place on the forty-third day.* During all this period, there was little *apparent* derangement in any of the organs, except a slight irritative fever, which supervened sixteen days after the injury, and continued to the termination of the case. So slight was this fever, that, in despite of all entreaties, the patient sat up every day, and frequently walked to the window and withdrew the curtain, in order to see the boys play in the streets, in which he took deep interest,—frequently laughing at their gambols. Four hours after death, I proceeded to the examination, in the presence of Doctors Edwards, Ohr, and Newcomer. Upon removing the cranium, the dura mater presented strong marks of inflammation over the entire arch of the head, being deeply injected in parts; and having depositions of coagulable lymph in others. From the antero-inferior angle of the right parietal bone, in a line back to its junction with the occipital, the dura mater was disorganised in three points by ulceration. The space of the skull, previously occupied by the right anterior and middle lobes of the cerebrum, presented a *perfect cavity*, the hollow of which was filled with some seropurulent matter—the lobes having been destroyed by supuration: the third lobe was much disorganised. The left hemisphere was in a state of *ramollissement* down to the corpus callosum. It was so much softened, that the slightest touch would remove portions; and, with the aid of a sponge, I wiped away its substance to near the corpus callosum, when it began to be firmer, but presented more the appearance of a homogeneous

mass, than of regular organisation. The chiasm of the optic nerves, as well as their entire tract, was so soft as to yield to a slight touch with the handle of the scalpel, and the olfactory were in the same condition. The corpus callosum, thalami nervorum opticorum, and tubercula quadrigemina, presented no pathological condition. The cerebellum and medulla oblongata were in a physiological state. The spinal column was not examined. This boy was remarkably intelligent. In my daily visits I held frequent conversations with him, and in all my observations I could not discover the slightest derangement of his intellectual faculties—no dullness of sensibility, no obtuseness of perception, no impairment of judgment, no want of memory, and, so far as mind is concerned, he gave no evidence of disease. His vision, audition, and voice, were unimpaired.

We here have a case, which presents that portion of the brain from which the nerves arise, in a physiological condition, and the general nervous apparatus in a sound state, fit for conveying impressions, whilst the organ, upon which depends perception and the perfection of ideas, is in a great degree lost, and what remains is in a highly pathological condition; yet we have all the manifestations of intellect, as if the encephalon were not required in those highest functions. His case contradicts the opinion of Sir Charles Bell, that disease of the general surface of the brain is always attended with derangement of the mind; and it is equally opposed to the views of Desmoulins, Gall, Spurzheim, and others, who contend, that the seat of intellection is in the periphery of the brain, or its convolutions. In like manner, the opinion of Magendie is contradicted,—that the sense of sight is always destroyed by removal of the cerebral hemisphere; for here the right hemisphere was destroyed, and yet vision was perfect with either eye. Where, I would ask, were the functions of mind executed in this case? Intellection was performed, the moral faculties were exercised, and that portion of the brain, in which we believe those important and complicated actions are generated and perfected, was either gone, or in a highly pathological state. I have given briefly, and I hope clearly, the facts in this case. To you I look for the deductions. I hope I have not trespassed too much on your time, by detailing a case, which presents much interest to the physiologist. I am, dear sir, very truly, your friend,

G. W. BOERSTLER.

Professor Dunglison.

CALCULOUS AFFECTIONS.

[The following observations on calculous depositions, and the mode of discriminating them, are from the "*British Medical Almanac*," for 1836;—a publication which might be imitated with much advantage in this country.]

In 1776 Scheele examined a stone out of the bladder, and discovered lithic or uric acid. Wollaston, in 1797, described five different kinds of stones; (1) uric acid; (2) phosphate of lime; (3) a mixture of the last salt with phosphate of ammonia and magnesia (*fusible calculus*); (4) pure phosphate of magnesia and lime; and (5) oxalate of lime (*mulberry calculus*). These are the chief concretions found in the bladder; before noticing them, we must say something of amorphous sediments and gravel.

A. AMORPHOUS SEDIMENTS may consist (1) of *uric acid*, which is of a yellow or brick-dust colour, like the ordinary sediment of cooled urine; (2) *phosphate of lime*, mixed with *phosphate of ammonia and magnesia*, and a considerable quantity of mucus. Received on a filter, this appears like mucus, but on drying it becomes earthy, pulverulent, and smooth to the touch. Diluted acids take up the earthy salts, leaving behind the mucus. Urine in which such sediments are observed, is always alkaline; containing carbonate of soda and carbonate of ammonia. (3) *The mucus of the bladder*, when in excess, looks something like the preceding sediment, but being without the earthy salts, it becomes of a greenish yellow on drying, and the urine is always acid.

B. CRYSTALLIZED DEPOSITS OR GRAVEL. The substances most frequently met with in this form, are (1) acid urate of ammonia in the form of small, shining, red or yellow, pointed, crystalline groups; (2) oxalate of lime (pale yellow or green crystals); (3) phosphate of ammonia and magnesia.

C. CALCULI should be divided with a fine saw, and polished by rubbing with water and the sawdust. They usually have a nucleus in the centre consisting of one substance, which afterwards alternates with unequal layers of other, and at times, of all the principles of urinary calculi. Many stones consist of the same substance in

successive layers. (1) *Uric acid* is the most constant constituent of urinary calculus. The acid is not pure in these stones, but is combined with a colouring matter, which gives them a yellow, almost mahogany colour. The fusible calculus, next in frequency to this, is white and chalky in appearance; and is readily dissolved by muriatic acid, while the uric acid calculus is dissolved without developing an ammoniacal odour by caustic potash, from which it is separated by muriatic acid in a gelatinous precipitate, that soon collects into a granular powder. The smallest fragment of uric acid or urate of ammonia, placed in a watch-glass upon which is a drop of nitric acid, and heated gradually, develops, in drying, a beautiful purple colour, the purpurate of ammonia. As too much nitric acid, as well as too strong a heat, destroys the colour, the solution should (according to the recommendation of Jacobson) only be evaporated over a lamp till it ceases to run, but is not dry, and the watch-glass be reversed over another in which are a few drops of ammonia; by the application of a gentle heat the ammonia rises, and no sooner neutralises the nitric acid, than the red colour appears. If, however, a small wax candle be used in these essays instead of a spirit-lamp, and the glass is not blackened, the heat will seldom be found too great. (2) *Urate of soda*, the gout stone, has never been found to constitute entire urinary concretions. (3) *Urate of ammonia* is a constituent part of calculi sometimes met with in children: on adding potash to its solution, ammonia is given off. (4) *Phosphate of lime* very rarely occurs alone, and in the neutral state: its powder dissolves more readily in nitric or muriatic acid than the bone-earth. (5) *Phosphate of ammonia and magnesia* is never found quite alone in calculi, but it often makes one of their chief constituents. Such stones are nearly always white, their surface is uneven, and covered with small shining crystals. Their structure is not lamellous, they feel rough, and are easily broken or rubbed to powder; very rarely they are found hard and crystalline. These stones are readily dissolved by acids; from this solution, caustic potash develops ammonia, withdraws phosphoric acid, and leaves behind magnesia undissolved. (6) *Basic phosphate of lime (bone-earth) and phosphate of ammonia and magnesia mixed*, constitute, next to uric acid, the most common materials of calculi. Their formation supposes that the urine is alkaline, or at least neutral. In these white, chalky stones, small shining crystals of phosphate of ammonia and magnesia may often be detected with a magnifying glass. By their ready fusibility before the blow-pipe, they are easily recognised, and were, on that account, called by Dr. Wollaston, *fusible calculi*. (7) *Oxalate of lime* is, apparently, a frequent constituent of calculi, particularly in children. The stones have usually an uneven surface resembling the mulberry; hence their common name of mulberry calculi. Their colour is dark, dark green, or brown. By digesting, muriatic acid dissolves the powder, and by evaporation, deposits the salt again in the form of small crystals.

Application of the blow-pipe in distinguishing calculi. *The mulberry calculus* placed in the flame of the blow-pipe, swells, turns black, smells like burnt horn, and after the carbonaceous mass has been exposed to a glow-heat, leaves caustic lime, which slakes in a drop of water, and reddens turmeric paper, without dissolving. *The fusible calculus* turns black, develops ammonia, and melts readily. A preponderance of the calcareous salt diminishes the fusibility, so that at last it may become infusible. *Phosphate of ammonia and magnesia* melts to a sort of enamel, which, mixed before melting with nitrate of cobalt, forms a red grain.

Phosphate of lime burns white, and at last melts, by which it is distinguished from basic phosphate of lime. *Uric acid* should at first be placed in the outer part of the flame, where it gradually diminishes, smelling like burnt horn or prussic acid; at length a period arrives when the residue takes fire, and continues to burn with much splendour after the blast has ceased.

Carbonate of lime is frequently met with as a concretion in herbivorous animals, but is very rare in man; as also are carbonate of magnesia, cystic oxide, and xanthic oxide.

NECROLOGY.

JOSEPH LOVELL, M. D., SURGEON GENERAL OF THE ARMY.

Died, recently, at Washington. Joseph Lovell, M. D. He entered the army in 1812, on the declaration of war with Great Britain, as surgeon of the 9th regiment, United States Infantry, and served in the campaigns on the Niagara frontier, in 1813 and 1814, during which he was so distinguished for devotion to the service, and the faithful discharge of his duties, that he was soon promoted to the rank of hospital surgeon, and,

in 1818, was elevated, by President Madison, to the station of surgeon-general to the army.

The following general order, issued on the occasion of his decease, exhibits the feeling of the commander in chief at the loss which the service has sustained.

ADJUTANT-GENERAL'S OFFICE, Washington, Oct. 18, 1836.

The Major-General Commanding in Chief, with great regret, announces to the Army the death of Joseph Lovell, M. D., the Surgeon-General.

The services of the deceased in peace and war have been eminent. His loss to the service will be severely felt. As an evidence of the esteem in which his character is held, the officers of the army are requested to wear the usual mourning for thirty days from this date.

By order of Major-General Macomb.

R. JONES, Adjutant General.

JOHN FLETCHER, M. D., OF EDINBURGH.

We regret to see, from the July number of that valuable periodical, *The British and Foreign Medical Review*, that this distinguished physiologist has recently died, in the 44th year of his age. It is only within the last eight years, when he joined the Argyle-Square Medical School, that Dr. Fletcher has been generally known as a physiologist. His great work is his *Rudiments of Physiology*, of which two parts only are published; the first, on regimen; the second on life, as manifested in imitation: the third and remaining part,—on life, as manifested in sensation and in thought,—has yet to appear; and, we are pleased to learn, has been left in such a state that it can be readily adapted for publication. The first part of the *Rudiments* is now before us. It consists of four chapters:—1. On the form and classification of organised beings. 2. On the aggregation of organised beings. 3. On the substance of organised beings, and 4. On the composition of organised beings. One section of the second chapter, "On the unity of the organic structure of animals," is rich in facts and illustrations. The whole work, indeed, affords abundant evidence of the talents and acquirements of the learned and lamented author.

MEDICAL INTELLIGENCE.

AMERICAN ALMANAC, FOR 1837. *Medical Schools*.—The value of a work like the "American Almanac," is its accuracy. On turning to the head of medical schools, we find the professors in the University of Pennsylvania stated to be *nine*, instead of seven; the number of students, during the last course, being given correctly, according to the published record, at 398; whilst the number of the professors in Jefferson Medical College is stated to be *six* in place of *seven*, and that of the students, during the last course, *one hundred and twenty-one*, in place of 364! The estimate of the professors and students of the University of Maryland is copied from that in the Almanac for 1835.

It affords us pleasure to announce to our readers, that both of the medical schools in Philadelphia have been, during the present month, delivering a series of lectures preparatory to the commencement of the regular WINTER SESSION, and the dissecting rooms of the Jefferson Medical College, and of Dr. Pancoast, have been open to the students for the study of practical anatomy. These lectures, and facilities for anatomical investigation, have had the effect of attracting an unusually large concourse of medical students to the city. We do not exaggerate in estimating the number at from 350 to 400, which is probably nearly twice as many as had arrived at the same date, (Oct. 28th) last year.

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